

Application Data Sheet

Application Information

Application number::	Unknown
Filing Date::	January 10, 2006
Application Type::	Regular
Title::	SYSTEM OF INFUSION OF PHARMACOLOGICAL SOLUTIONS
Attorney Docket Number::	4017-41
Total Drawing Sheets::	5
Small Entity?::	Yes

Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	Italy
Status::	Full Capacity
Given Name::	Marco
Family Name::	PIROVANO
City of Residence::	Milano
Country of Residence::	Italy
Street of mailing address::	Via Vittadini, 9
City of mailing address::	Milano
Country of mailing address::	Italy
Postal or Zip Code of mailing address::	20146
Applicant Authority Type::	Inventor
Primary Citizenship Country::	Italy
Status::	Full Capacity
Given Name::	Stefania
Family Name::	IMPROTA
City of Residence::	Roma
Country of Residence::	Italy

Street of mailing address:: Via Posidippo, 8
City of mailing address:: Roma
Country of mailing address:: Italy
Postal or Zip Code of mailing address:: 00125

Correspondence Information

Correspondence Customer Number:: 23117

Representative Information

Representative Customer Number:: 23117

Foreign Priority Information

Country::	Application Number::	Filing Date:: DAY/MONTH/YEAR	Priority Claimed::
IT	MO2003A000201	11 July 2003	Yes
	PCT/IB2004/002245	9 July 2004	Yes

Assignee Information

Assignee Name:: H.S. Hospital Service S.p.A.
Street of mailing address:: Via delle Valli
City of mailing address:: Aprilia (LT)
Country of mailing address:: Italy
Postal or Zip Code of mailing Address:: 04011